

**PTC/SB/08 (12-04)**

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## Application or Docket Number

Substitute for Form PTO-875

**(Column 1)**

(Column 2)

**SMALL ENTITY**

DR

**OTHER THAN  
SMALL ENTITY**

**\* MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(f))**

\* If the difference in column 1 is less than zero, enter "0" in column 2.

10/2/06

(Column 1)

(Column 2)

**(Column 3)**

**SMALL ENTITY**

**OR**

**OTHER THAN  
SMALL ENTITY**

Application Size Fee (37 CFR 1.16(b))**FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.180)**TOTAL  
ADD'L FEE

42

TOTAL	
ADD'L FEE	

## AMENDMENT B

**(Column 1)**

(Column 2)

(Column 3)

**RATE (\$)**

**ADD-**

**RATE (\$)**

**ADDI-**

Application Size Fee (37 CFR 1.16(s))**TOTAL  
ADD'L FEE**

OR

**TOTAL  
ADD'L FEE**

- \* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  
 \*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".  
 \*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

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